

Developmental Disabilities Administration Guide to Services

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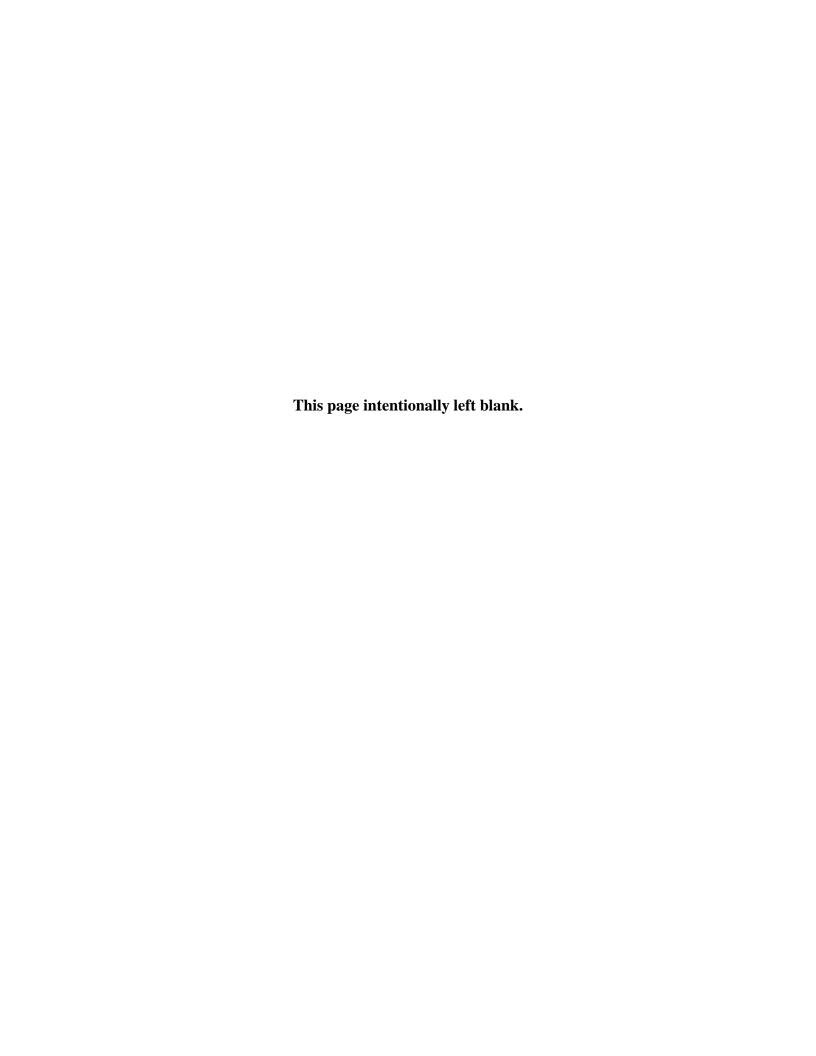


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THE DEVELOPMENTAL DISABILITIES ADMINISTRATOIN

The Developmental Disabilities Administration (DDA) is part of the Maryland Department of Health and Mental Hygiene. The DDA is the primary state agency that funds community-based services and supports for people with developmental disabilities. The DDA works closely with other federal, state, and local agencies to ensure that people access all appropriate, available resources to which they are entitled and/or eligible.

DDA'S MISSION

The DDA *partners* with people with developmental disabilities to provide leadership and resources to live fulfilling lives.

DDA'S VISION

All Marylander's lead personally defined and fulfilling lives.

GOALS

People with developmental disabilities...

- Direct their lives;
- Have viable support options; and
- Have information to make decisions.

DDA'S COMMUNITY BASED SERVICES SYSTEMS

The DDA funds a variety of community based services, which are included in this guide, either through a Medicaid Waiver or DDA State funded program. Services are generally the same in both systems; however, the services that you may be able to receive are related to your eligibility category and regulations. People receiving services through DDA also received help from family members, community organizations, and other programs outside of the DDA.

There is a great demand for funding for services from the DDA. The DDA currently is unable to meet all the requests so it established a Waiting List. The Waiting List is prioritized so that people with the greatest need are helped first. The DDA follows regulations to determine eligibility and priority category and placement on the Waiting List. People who apply to the DDA but do not need services within the next three years are placed on the Future Needs Registry.

The DDA is able to provide a resource coordinator to help people with their application for eligibility for services from DDA. They will also talk with you about the types of services or supports you need.

Who is Eligible for Services from the DDA?

To receive services from the Maryland Developmental Disabilities Administration (DDA), individuals must have a severe, chronic disability which keeps them from handling their daily activities independently. Eligibility requirements for children are generally the same as those for adults. The DDA follows regulations requirements to make decisions related to eligibility.

How do I Apply for Eligibility?

In order for DDA to determine whether a person is eligible for services, the person or someone acting on their behalf must complete an application for DDA services.

The *DDA Application for Services* can be downloaded from DDA's website, mailed to you, or you can pick one up from any of DDA's four (4) regional offices located in Central, Eastern, Southern, and Western Maryland.

Once DDA has received an application and any supporting documentation, DDA, or a representative, will contact the applicant to schedule an interview. After completing the application process, applicants receive a letter stating their eligibility status. If eligible, the letter will also include information on which priority category they have been found eligible for. Letters also contain information to assist the person in filing an appeal if they feel that they have not been placed in the proper eligibility priority category.

Eligibility for services does not mean that the DDA is able to provide funding to address your needs. It means that when designated funding for your priority category is available and you have the greatest need, your resource coordinator will be informed and help you explore services and provider options. *People allocated funding must apply for the DDA waiver*.

MEDICAID WAIVER

What is a Waiver?

Medicaid provides health care to people who have a low income and who are elderly, pregnant, have a disability or is a family with children. It is the major funding source for institutional and community services for people with disabilities and the elderly. Medicaid is run by the State and pays medical bills with State and federal tax money.

A waiver from the Centers on Medicare and Medicaid (CMS) allows states to **waive or bend the usual rules** to allow Medicaid and other services to be delivered in a different place, to people with different needs, or different income levels. CMS administers several different waiver programs that states use to fund community supports. States apply for a waiver and put in matching dollars according to a formula based on each state's population and income.

In Maryland, the DDA and the state's Medicaid office applied to CMS for a home and community-based services (HCBS) waiver. For people who are eligible, this kind of waiver provides services in the community as an alternative to receiving them in an institution. The home and community-based services waiver that DDA provides is called the Community Pathways Waiver.

THE COMMUNITY PATHWAYS WAIVER

What is the Community Pathways Waiver?

The Community Pathways waiver provides services and supports to individuals, of any age, living in the community through licensed provider agencies or self-directed services that are funded by DDA. All individuals participating in the waiver must meet the eligibility criteria for the waiver which are included in the agreement with CMS and noted in regulations.

The Community Pathways wavier is different from most other waivers in a couple of ways. First, it offers you a choice of 19 different types of services. Services are delivered by licensed service providers and independent providers throughout the State. This waiver also gives you the option of self-direction. If you choose to self-direct it means you become the employer of your support workers, including selecting the workers, deciding their salaries, and hours.

All participants in the Community Pathways Waiver will have the opportunity to choose a resource coordination agency. The resource coordinator will share information about services, models (traditional and self-directed), and providers. Together, you and the resource coordinator will develop your Individual Plan (IP) based on your goals, strengths, needs, and what will help you be more independent. The resource coordinator also assists you in finding and connecting with other community resources.

Through the waiver:

- 1. You choose your own goals and identify the supports and services you need;
- 2. Your goals will make up your individual plan, that includes the services you need;
- 3. You will also have a budget plan that tells you how much money is available to pay for your services;
- 4. You are encouraged to be creative as you make and implement your plan;
- 5. You will have people to help you to think of ways to meet your needs in your community and how to use yours strengths to reach your goals; and
- 6. You are a leader for your individual plan. You are a self-advocate for the services and supports you receive.

Who is Eligible for the Community Pathways Waiver?

People (both children and adults) who have been allocated DDA funding and have the "developmental disability" eligibility category may be eligible for the waiver. To be eligible for waiver services, you must demonstrate through a screening process that you need the level of support that people receive in an institution and meet the waiver's financial eligibility requirements. You do not have to go into an institution or agree to apply to an institution to apply to the waiver or receive services.

When can I Apply to the Waiver?

When funding becomes available, the DDA will contact your resource coordinator to let them know. The resource coordinator will then contact you to schedule a time to complete an application for the Community Pathways Waiver.

PRINCIPLES OF SELF-DETERMINATION

The Community Pathways Waiver is guided by the principles of self-determination. Self-determination is a broad concept that means you have overall control of your life and are part of your community. It is based on five basic principles:

FREEDOM: You have the freedom to plan and create a meaningful life for yourself.

AUTHORITY: You have authority over the money used to support you. With your individual budget you can purchase the supports you need to live the life you have chosen. You will pay for just what you need and receive.

SUPPORT: You get the support you need to live the life you want. You have a circle of supports around you which is made up of family, friends, paid and unpaid supports, and other natural supports.

RESPONSIBILITY: You have the responsibility for using your individual budget wisely, helping with your own support, and for giving back to your community. You cannot have freedom without taking on more responsibility. You can assume responsibility for giving back to your community, for seeking employment whenever possible, and for developing your unique gifts and talents.

CONFIRMATION: You can be an important part of your community based on what you give back. You can have a leadership role in the design of government and the services used to support all people with developmental disabilities.

RESOURCE COORDINATION

A resource coordinator helps you and your family to make informed decisions. They will assist you in the process of applying for both DDA eligibility and the Community Pathways Waiver (when you are allocated funding). Your resource coordinator can help you gather the information needed for the applications. If you are found eligible and are approved for the waiver, they will assist you to develop, revise, update, and implement your individual plan.

After you are accepted for or enrolled in the waiver, the resource coordinator will assist you in finding service providers. You may ask your family and friends to help find the best agency or staff to provide your services. If you like, the resource coordinator can help you interview the service providers. Part of implementing services is putting together a budget. Your resource coordinator will work with DDA and your providers to create a budget plan.

The resource coordinator will continue to work with you after your services start to make sure they are helping you meet your goals, supporting independence, and that you are pleased with your services. Your resource coordinator will stay in touch by scheduling visits, calling, and or emailing to check on your health status and any changes to your needs, so that changes to your individual plan can be made if needed. They also check the quality of your services and supports to make sure your health and safety are protected. The resource coordinator will keep copies of all your paperwork and work with you while they review your individual plan each year. They will make sure you have a copy of your most recent individual plan.

The resource coordinator:

- Assesses your needs, helps with person-centered planning, and assists with the development of the initial and annual plan and budget;
- Identifies community resources to help you;
- Verifies that all services are waiver eligible services;
- Verifies that all services are important for the outcomes and goals you want and do not risk your health and safety;
- Monitors that the services are being delivered appropriately and that the funds are being spent correctly;
- Monitors your emergency backup plan; and
- Provides checks and balances necessary for your health and welfare and overall program integrity.

If you choose to self-direct your services the resource coordinator will also:

- Helps you interview and choose a Support Broker;
- Helps you choose a Fiscal Management Service (FMS) provider;
- Helps monitor your monthly budget statement; and
- Helps with questions or concerns you might have with the Support Broker or the FMS.

PARTICIPANT SELF-DIRECTION

What is Self-Direction?

The Community Pathways Waiver offers the option of self-directed services. This is service delivery for individuals with developmental disabilities and/or designated representatives who wish to exercise more choice, control, and authority over their supports.

Self-direction gives waiver participants and families greater control over the services they receive, how they receive them, and who provides them. At the same time, people who self-direct must be willing to take on the responsibility of managing their services. For services you choose to self-direct, you have additional responsibility including:

- 1. You will be in control of your budget which is a fixed dollar amount for the purchase of services and supports available under the waiver;
- 2. You select and arrange for the services and supports in your individual plan;
- 3. You are accountable for using your budget to more effectively meet your needs and more efficiently use public dollars;
- 4. You are the employer of record; and
- 5. You can hire, train, and fire employees.

A self-directed service delivery system provides an opportunity for you to explore new ways of receiving support services. To assist individuals who choose to self-direct their services, a *support broker* and a *fiscal management service* will also be provided in addition to the resource coordinator.

Who is a Support Broker?

A support broker helps you and your family to make informed decisions. The support broker will provide information about how the self-direction system works, including information on:

- Self-direction including roles and responsibilities and functioning as the common law employer;
- Person-centered planning and how it is applied;
- The range and scope of individual choices and options;
- The process for changing the individual plan and budget;
- The grievance process;
- Risks and responsibilities of self-direction;
- The Policy on Reportable Incidents and Investigations;
- Free choice of staff/employees;
- Individual rights;
- The reassessment and review of schedules;
- Acts as a human resource support to decide what staff and services are best for your needs and circumstances; and
- May assist with day-to-day management of employees.

In a self-directed system, you are the employer; you may choose to use the following support broker services for training and assistance with employer functions. A support broker may assist you with:

Employer Tasks

- Managing employees, supports and services;
- > Recruiting, interviewing, and hiring staff;
- > Staff supervision and evaluation;
- > Firing staff; and
- > Facilitating meetings and trainings with employees.

Financial Tasks

- Ensuring that the individualized budget is being spent in accordance with the approved individual plan and budget;
- ➤ Managing the budget and any budget modifications;
- > Reviewing employee timesheets;
- Completing Fiscal Management Services reports; and
- Conducting audits.

Program Tasks

- ➤ Initial planning and start-up activities;
- > Employment quality assurance activities;
- Developing and reviewing data, employee timesheets, and communication logs;
- Development and maintenance of effective back-up and emergency plans; and
- ➤ Complying with all applicable regulations and policies, standards for self-direction, staffing requirements, and limitations as required by the DDA.

Crisis Management Tasks

- > Development of an emergency back-up plan;
- Recognizing and reporting critical events;
- ➤ Independent advocacy, to assist in filing grievances and complaints when necessary;
- ➤ Training all of your employees on the Policy on Reportable Incidents and Investigations (PORII); and
- ➤ Ensuring that all critical incidents are reported to the Office of Health Care Quality (OHCQ) and DDA.

**A support broker may assist you with other areas related to managing services and supports.

What are Fiscal Management Services?

A Fiscal Management Service (FMS) provider assists with the financial tasks of managing employees for people who self-direct their services. An FMS can assist you or your legally authorized representative by:

- 1. Managing and directing the spending of funds in your participant-directed budget.
- 2. Acting as your agent for employer responsibilities such as:
 - Verifying provider qualifications and licensing requirements;
 - ➤ Verifying workers' citizenship or legal alien status;
 - Conduct criminal background checks;
 - > Collect and process timesheets of support workers;
 - ➤ Distribute payroll checks;
 - Processing payroll;

- Withholding Federal, state, and local tax; and
- Making tax payments to appropriate tax authorities.
- 3. Handling the accounting and sending expenditure reports to the participant or family and State authorities.
- 4. Managing Budget Authority tasks such as:
 - > Receiving and disbursing public funds;
 - > Tracking and reporting on your budget;
 - Processing and paying invoices for goods and services approved in the service plan;
 - > Providing periodic reports of expenditures and the status of the participant-directed budget as requested; and
 - > Filing annual federal and State reports.

DDA COMMUNITY SERVICES

If you are approved ongoing funding under the Community Pathways Waiver or DDA State funding, you may receive one or more of the following types of services. You will have an Individual Plan (IP) showing what services you are to receive, who will provide them, and how often.

Each service has limitations on the amount of time, funds, or people who can deliver them. Some can be self-directed and some cannot.

The DDA also administers the Low Intensity Support Services (LISS) that is not included under the Community Pathways Waiver or DDA's ongoing State funded system. Additional information about this service can be provided by your resource coordinator and found on the DDA website.

What services are funded by the DDA?

The following services are provided under the Community Pathways Waiver:

- 1. Assistive Technology and Adaptive Equipment
- 2. Behavioral Supports
- 3. Community Learning Services
- 4. Community Residential Habilitation Services
- 5. Day Habilitation Traditional
- 6. Employment Discovery and Customization
- 7. Environmental Accessibility Adaptations
- 8. Environmental Assessment
- 9. Family and Individual Support Services
- 10. Live-In Caregiver Rent
- 11. Medical Day Care
- 12. Personal Supports
- 13. Respite
- 14. Shared Living
- 15. Support Brokerage
- 16. Supported Employment
- 17. Transition Services
- 18. Transportation
- 19. Vehicle Modifications

A brief description of the 19 services, who can provide the service, whether they can be self-directed, and any limitations are noted below. Additional information and specific requirements can be reviewed within the Community Pathway's federally approved waiver application, Community Pathways regulations (COMAR 10.09.26), and the DDA regulations (COMAR 10.22).

ASSISTIVE TECHNOLOGY AND ADAPTIVE EQUIPMENT

A variety of items used to increase, maintain, or improve the function and abilities of participants. These items may also improve your participation in the community.

Description

Examples of the types of devices include communication, visual or auditory support devices, surveillance or emergency signaling systems, and equipment that allow you to live more independently.

An assessment is required and the device or equipment needs to be included the individual plan for the DDA to preauthorize this service. Additionally, assistance in selecting the most appropriate device, along with training on the use of the device, and applicable upkeep and repair are included in the service.

Who can provide the service?

Providers are required to be an approved vendor of the Division of Rehabilitation Services or certified by the DDA. Services must be preauthorized by the DDA.

Who directs the services?

Assistive Technology and Adaptive Equipment can be self-directed.

Limitations

Items not paid for under this service are:

- Both manual and power wheelchairs;
- Home or environmental modifications;
- Adaptive driving;
- Vehicle modifications; and
- Devices requiring a prescription by doctors.

BEHAVIORAL SUPPORTS

Behavioral supports include a variety of services to assist you if you have trouble with community living because of behavioral, social, or emotional issues.

Description

Behavior support service providers will provide services in your home or other non-institutional settings. Services help increase your independence and reduce level of service need. Examples include:

- Behavior consultation;
- Behavior plan development and monitoring;
- Behavioral support;
- Training for families and other service providers;
- Behavioral respite; and
- Intensive behavioral management services.

Who can provide the service?

Only DDA licensed service providers may provide behavioral supports. Services must be preauthorized by the DDA.

Who directs the services?

This is not a self-directed service.

Limitations

Services must be included in the individual plan to be available in the waiver.

COMMUNITY LEARNING SERVICES

Community learning services are activities, special assistance, support, and education to help individuals whose age, disability, or circumstances currently limits their ability to be employed and/or participate in activities in their communities. They assist you in developing the skills and social supports necessary to gain, retain, or advance in employment.

Description

Examples of community learning services include:

- Self-determination or self-advocacy training;
- Workshops and classes;
- Peer mentoring;
- Volunteer activities: and
- Activities that promote health and socialization.

Who can provide the service?

DDA certified organized health care providers and DDA licensed vocation and day service providers.

Family members may provide community learning services if you choose to self-direct if they meet certain conditions:

- You really want this person to provide these services;
- The services will support you and you independence and community integration;
- The family member's tasks will be stated in the IP and followed correctly;
- They must keep records on your employment and finances; and
- They also have to keep their own timesheets and service delivery records.

Payment for services is dependent on completing these requirements.

Who directs the services?

Community learning services can be self-directed.

Limitations

A family member of an adult participant may not be paid for more than 40-hours per week of services.

COMMUNITY RESIDENTIAL HABILITATION SERVICES

Community residential habilitation services help you learn the skills necessary to be as independent as possible in your own care and in community life. Residential services are provided in either group homes (GHs) or alternative living units (ALUs). ALUs are licensed residential services providing 10 or more hours of supervision per week for up to 3 people. In these homes, services can help you learn how to stay in the community with as much independence as possible.

Description

Community residential habilitation services help people gain skills to maximize independence with activities of daily living and to participate in community life. This service will provide different levels of guidance and supervision as you progress through the program.

Community residential habilitation services may include a combination of the following tasks:

- Learning things to improve the individual's quality of life, such as training in:
 - a. Self-help
 - b. Daily living
 - c. Self-advocacy
 - d. Survival skills
 - e. Mobility training to maximize use of public transportation
 - f. Learning correct social behaviors
 - g. How to handle money
- Transportation to and from medical appointments;
- Transportation services or assistance to activities in the community; and
- Medical services, such as physical and/or occupational therapy services, speech pathology, and nursing services.

This service also includes an opportunity to go for short-term overnight visits with a community provider to explore and experience services before you make a decision. This is called "community exploration."

Who can provide the service?

DDA licensed residential providers or DDA certified organized health care providers. Services must be preauthorized.

Who directs the services?

This is not a self-directed service.

Limitations

Community exploration for people transitioning from an institution may be provided up to 7 nights so you can become acquainted with the provider before making the move to the residence.

DAY HABILITATION - TRADITIONAL

Day habilitation teaches skills for employment and/or community living. The service is designed for each individual and his or her goals for employment. You will take part in activities in places other than you home for the majority of the day.

Description

Day habilitation services are intended to increase independence and develop and maintain motor skills, communication skills, and personal hygiene skills related to specific habilitation goals that lead to opportunities for integrated employment.

They may include other services to help successful participation in the day activities which may include:

- Physical therapy
- Occupational therapy
- Nursing services
- Speech pathology
- Social services
- Special diets, exercise, and preventive activities
- Transportation

Day habilitation includes a yearly assessment of your own employment goals and what barriers you might face to employment and community integration.

Who can provide the service?

DDA certified organized health care providers or DDA licensed vocation and day service providers. Services must be preauthorized.

Who directs the services?

This is not a self-directed service.

EMPLOYMENT DISCOVERY AND CUSTOMIZATION

Employment discovery and customization services are designed to help access employment or explore the possibilities and impact of work.

Description

These are time-limited activities, which include assessment, discovery, customization, and training activities.

Examples of these services include but are not limited to:

- Job and task analysis activities;
- Work skill training; and
- Training in social skills.

Who can provide the service?

DDA certified organized health care providers and DDA licensed vocation and day service providers.

Family members may provide employment discovery and customization services if you choose to self-direct if they meet certain conditions:

- You really want this person to provide these services;
- The services will support your independence and community integration;
- The family member's tasks will be stated in the IP and followed correctly;
- They must keep records on your employment and finances; and
- They also have to keep their own timesheets and service delivery records.

Payment for services is dependent on completing these requirements.

Who directs the services?

Employment discovery and customization services can be self-directed.

Limitations

Employment discovery and customization services may be provided for up to a 6-month period. A family member of an adult participant may not be paid for more than 40-hours per week of services.

ENVIRONMENTAL ACCESSIBILITY ADAPTATIONS

Environmental accessibility adaptations are home modifications or devices connected to the home. They help you function more independently and to create a safer, healthier environment. In order to have accessibility adaptations approved, changes to your home must be necessary to prevent institutionalization or hospitalization.

Description

Examples of accessible adaptations are:

- Installing grab bars or ramps;
- Widening of doorways for wheelchair use;
- Modifying electrical and lighting systems; and
- Generators to support medical equipment.

Who can provide the service?

Eligible organizations include licensed home contractors and builders, Division of Rehabilitation Services approved vendors, and DDA certified organized health care providers. A Home Improvement License may be required to complete some projects.

Who directs the services?

Environmental accessibility adaptations can be self-directed.

Limitations

There is a \$17,500 lifetime limit for environmental adaptations, combined with vehicle modifications, unless otherwise approved by DDA. Adaptations which are not of direct medical

or functional benefit to you are not allowed. All adaptations over \$1,000 must be preauthorized by the DDA and approved in your individual plan.

ENVIRONMENTAL ASSESSMENT

An environmental assessment is an on-site evaluation of your primary residence to determine if environmental adaptations/modifications or assistive devices/equipment may be necessary.

Description

Included in the environmental assessment are:

- Reviews of environmental factors in the home;
- Your ability to perform activities of daily living;
- Your strength, range of motion, and endurance;
- Your need for assistive devices and equipment; and
- You, your family's, or service provider's knowledge of health and safety.

A report will document the findings and recommendations.

Who can provide the service?

An agency with a licensed occupational therapist including, Division of Rehabilitation Services approved vendors, and DDA certified organized health care providers.

Who directs the services?

This is not a self-directed service.

Limitations

Environmental assessments are limited to one (1) assessment per year, unless otherwise approved by DDA.

FAMILY AND INDIVIDUAL SUPPORT SERVICES

Family and Individual Support Services (FISS) are the assistance provided to enable your participation in the community. They make use of resources available in the community while, at the same time, building on existing support network.

Description

Examples include but are not limited to:

- Assistance locating and accessing education, recreational and social activities, and roommates of the individual's choosing;
- Providing training related to finances, including money management, banking, and tax preparation;
- Training, facilitating opportunities and accompanying you to acquire self-advocacy and independent living skills.

FISS for participants who self-direct services also includes individual directed goods and services, linked to a specific need and described in the individual plan.

Who can provide the service?

DDA licensed providers including family and individual support service providers and certified organized health care providers.

Family members may provide FISS if you choose to self-direct if they meet certain conditions:

- You really want this person to provide these services;
- The services will support your independence and community integration;
- The family member's tasks will be stated in the IP and followed correctly;
- They must keep records on your employment and finances; and
- They also have to keep their own timesheets and service delivery records.

Payment for services is dependent on completing these requirements.

Who directs the services?

Family and Individual Support Services may be self-directed.

Limitations

FISS does not include the payment for daycare, groceries, education, recreational or social activities. They are not available if you are currently receiving community residential habilitation services.

LIVE-IN CAREGIVER RENT

Live-in caregiver rent provides money for a personal caregiver who is not related to you.

Description

The personal caregiver is responsible for providing personal assistance in your home. The cost for their additional bedroom is covered (for example, the difference of rent charged for a 2-bedroom unit compared to a 1-bedroom unit in your neighborhood as determined by the Department of Housing and Urban Development (HUD)).

Several items must be signed by both you and your caregiver and then sent to DDA and the resource coordinator; these include:

- 1. Detailed list of what services the caregiver will perform;
- 2. What will happen when the live-in arrangement ends;
- 3. How you will manage when services are not delivered; and
- 4. How much will be paid for rent.

In order for the caregiver rent to be paid, DDA must have proof that the services were performed and will only pay for those months that the live-in caregiver arrangement was successfully carried out. The State will not be responsible for your or caregiver's unpaid rent if the services were not correctly delivered.

Who can provide the service?

A DDA licensed provider certified as an organized health care provider not related to you.

Who directs the services?

Live-in caregiver rent can be self-directed.

Limitations

Live-in caregiver rent is not available when you live in your family's home, the caregiver's home, or a residence owned or leased by a DDA-licensed provider.

MEDICAL DAY CARE

Medical day care is a group program that provides health, social and related support services. You can receive medical care during the day in a community-based setting offering individuals an alternative to nursing facility care.

Description

Medical services may be offered such as:

- Prevention
- Early diagnosis
- Rehabilitation
- Nursing care
- Physical therapy
- Occupational therapy

Other services may also be available, like:

- Social work
- Nutrition services
- Activity programs
- Transportation

You must attend the medical day care for a minimum of 4 hours per day. Physician orders incorporated into the individual plan determine the frequency of attendance.

Who can provide the service?

Licensed Medical Day Care Providers.

Who directs the services?

This is not a self-directed service.

Limitations

You must be over age 16 to participate and be certified as requiring nursing facility care. The service must be medically necessary.

PERSONAL SUPPORTS

Personal supports are hands-on assistance (actually performing a task for you) or reminding you to perform a task. These supports are provided in your own home, family home, in the community, and/or at a work site.

Description

These are some of the tasks a personal supports worker might help with:

- Bathing;
- Toileting;
- Mobility, including transferring from a bed, chair, or other place and moving about indoors and outdoors;
- Moving, turning, and positioning the body while in bed or in a wheelchair;
- Eating and preparing meals;
- Dressing and changing clothes;
- Light housework including laundry; and
- Care of adaptive devices.

Support, supervision, and training may be provided in such activities as:

- Housekeeping;
- Menu planning, food shopping, meal preparation, and eating; and
- Personal care and assistance with hygiene and grooming.

Who can provide the service?

Individuals not employed by an agency can provide personal supports with some conditions:

- They have had current first aid and CPR training;
- They pass a criminal background check;
- They agree to learn the your preferences; and
- They agree to learn information about your disability.

Individuals employed by a DDA licensed agencies who meets the same requirements.

Family members may provide personal supports if you choose to self-direct and they meet certain conditions:

- You really want this person to provide respite;
- The services will support the your independence and community integration;
- The family member's tasks will be stated in the IP and followed correctly;
- They must keep records on your employment and finances; and
- They also have to keep their own timesheets and service delivery records.

Payment for services is dependent on completing these requirements.

Who directs the services?

Personal supports can be self-directed. If you choose to self-direct, you will be responsible for supervising, training, and determining the frequency of supervision of your direct service workers. When self-directing services, you are the employer of record.

Limitations

There are limitation on the number of hours of personal supports, depending on the type of provider and approval by DDA. Personal Support is usually limited to 82 hours per week. Staff can work no more than 40 hours per week work no more than 8 consecutive hours unless preauthorized by the DDA. Staff must have 8 hours or more off before starting another shift. A family member of an adult participant may not be paid for greater than 40-hours per week unless otherwise.

RESPITE

Respite is a short-term relief service provided when your regular caregiver is absent or needs a break. The service is provided in your home and/or community settings to meet planned or emergency situations, giving caregivers a time free from their role as care provider.

Description

Respite care can be provided in your home, a family member's home, or in a certified overnight camp. Specific tasks are included in the individual plan and generally replace those normally performed by the absent family member to support independence.

Who can provide the service?

Respite care providers who meet the following certification requirements:

- They have had current first aid and CPR training;
- They pass a criminal background check;
- They agree to learn your preferences;
- They agree to learn information about your disability; and
- They have the appropriate licenses and certifications based on your needs.

Family members, who do not reside on your property, can provide respite services if they meet certain conditions:

- You really want this person to provide respite;
- The services will support your independence and community integration;
- The family member's tasks will be stated in the IP and followed correctly; and
- Spouses and legally responsible relatives are not allowed to be paid for respite services.

Who directs the services?

Respite services can be self-directed if you choose. If that option is selected, you become the employer.

Limitations

Respite care services may not exceed 45 calendar days within each year and may not be provided for more than 28 consecutive calendar days unless approved by DDA. A family member who is providing respite care may not be paid for more than 40-hours per week of services.

SHARED LIVING

Shared living is an arrangement in which an individual, couple or a family in the community share life's experiences and their home with you. It emphasizes the long-term sharing of lives, forming of caring households, and close personal relationships between you and support person(s).

Description

Support services are intended to maximize your independence in activities of daily living and to fully participate in community life.

They may include but are not limited to:

- Training in the development of self-help, daily living, self-advocacy, and survival skills;
- Training and assistance in developing appropriate social behaviors for community settings;
- Training and assistance in developing housekeeping skills;
- Training and assistance in developing patterns of living, activities, and routines that are appropriate to you and your surrounding community; and
- Supervision or guidance as appropriate.

Who can provide the service?

An individual, couple, or a family who lives with and provides companionship support you, who are chosen by you and who meet certification requirements and sign a provider agreement with the DDA. Additionally, a DDA licensed provider can provide shared living services.

Who directs the services?

This is not a self-directed service.

Limitations

The payment cannot include room and board or any contribution towards your cost of care. No more than three (3) waiver participants may reside in one residence under shared living.

SUPPORT BROKERAGE

Support brokerage is information and assistance to support self-direction. If you choose self-direction, you will need to coordinate your service package with a support broker. It is a service that assists you and your family in making informed decisions about what service design and delivery will work best and is consistent with your needs.

Description

The support broker may assist with day-to-day management of employees and assist you and your family in the ongoing employer decisions associated with self-direction. Support broker services include:

- Skills training;
- Roles and responsibilities of being an employer;

- Managing employees, supports, and services;
- Range and scope of individual choices and options;
- Development of risk management strategies; and
- Other areas related to managing services and supports.

Who can provide the service?

Agencies certified by the DDA for support brokerage.

An individual you select who is certified by the DDA to demonstrate knowledge and skills related to self-determination, consumer directed services, service systems for individuals with disabilities and effective staff management strategies. Training will be available to assist support brokers to gain the skills necessary to act in this capacity.

You may have a family member, with the exception of spouses, legally responsible adults and legal representative payees, serve as your paid support broker. Spouses and legally responsible adults may act only as unpaid support brokers.

Who directs the services?

Support brokerage can be self-directed.

Limitations

Individuals and organizations providing support brokerage services cannot provide other services to you. There is an initial limit of up to 10 hours a month that is preauthorized by the DDA unless a unique situation requires additional support.

SUPPORTED EMPLOYMENT

Supported employment is employment in a work place in the community where the majority of individuals do not have disabilities. The services are designed to assist you with accessing and maintaining paid employment in the community.

Description

Examples of available services are:

- Job coaching and counseling;
- Worksite visits;
- Ongoing evaluation;
- Monitoring your performance; and
- Training in acclimating to or acceptance in the workplace.

Personal care/assistance may be a part of supported employment services but may not be the entirety of the service.

Who can provide the service?

DDA certified organized health care providers or DDA licensed vocation and day service providers.

Family members may provide supported employment services if you choose to self-direct if they meet certain conditions:

- You really want this person to provide these services;
- The services will support your independence and community integration;
- The family member's tasks will be stated in the individual plan and followed correctly;
- They must keep records on your employment and finances; and
- They also have to keep their own timesheets and service delivery records.

Payment for services is dependent on completing these requirements.

Who directs the services?

Supported employment can be self-directed if you choose. Then you become the employer of record.

Limitations

Supported employment does not include volunteer work or payment for supervision, training, supports, and adaptations typically available to other workers without disabilities filling similar positions.

TRANSITION SERVICES

Transition services are one-time set-up expenses if you are moving from an institution or a provider setting to a living arrangement in a private residence where you will be responsible for your own living expenses or a different provider setting. Allowable expenses are those necessary to set up a basic household and must be preapproved by the DDA.

Description

They do not include room and board, but may include:

- Security deposits that are required to obtain a lease on an apartment or home;
- Essential household furnishings including furniture, window coverings, food preparation items, and bed/bath linens;
- Set-up fees or deposits for utility or service access, including telephone, electricity, heating and water;
- Services necessary for your health and safety such as pest eradication and one-time cleaning prior to occupancy;
- Moving expenses; and
- Activities to assess need and arrange for and procure needed resources.

Who can provide the service?

DDA licensed providers including community supported living arrangement providers, family and individual support service providers, residential habilitation providers, and certified organized health care providers.

Who directs the services?

Transition services may be self-directed.

Limitations

Payment is allowable for transition services incurred no more than 180 calendar days in advance of waiver enrollment. The maximum payment may not exceed \$5,000 per lifetime unless otherwise approved by the DDA.

Transition services do not include monthly rent or mortgage, food, and regular utility charges. They also do not include household appliances or items that are for entertainment such, as televisions, game stations, DVD players, monthly cable fees, and monthly telephone fees.

Items may not be purchased from a family member or relative.

TRANSPORTATION

Transportation services are designed to enhance a person's ability to access community activities based on needs identified in the participant's individual plan. Services should increase independence and reduce the level of service need.

Description

Services can include mobility and travel training including learning how to access and utilize informal, generic, and public transportation for independence and community integration.

Transportation services may be provided in several ways, including public transportation, taxi services, and by other providers.

Transportation services shall be provided by the most cost-efficient mode available and shall be wheelchair accessible when needed.

Who can provide the service?

Agency providers can include licensed family and individual support service providers and certified organized health care providers.

Family members may provide transportation services if you choose to self-direct if they meet certain conditions. Payment for services is dependent on completing these requirements:

- You really want this person to provide these services;
- The services will support your independence and community integration;
- The family member's tasks will be stated in the individual plan and followed correctly;
- They also have to keep their own timesheets and service delivery records; and
- Spouses and legally responsible relatives are not allowed to be paid for transportation services.

Who directs the services?

Transportation services can be self-directed.

Limitations

Stand-alone transportation services are limited to \$1,400 per year unless you are self-directing. Spouses or legally responsible individuals cannot be paid for providing transportation services.

VEHICLE MODIFICATIONS

Vehicle modification services enable you to achieve employment goals and to live successfully in the community when other options are not available from natural supports or the community or covered by the program. Vehicle modifications do not include the purchase of new or used vehicles, general vehicle maintenance or repair, state inspections, insurance, gasoline, fines, tickets, or the purchase of warranties.

Description

Modifications can be made to a vehicle owned by or a new vehicle purchased by you, or a legally responsible parent if you are a minor or other as approved by DDA.

Vehicle modifications may include:

- Assessment services to:
 - o Help determine your specific needs as a driver or passenger;
 - o Review modification options; and
 - o Develop a prescription for required modifications of a vehicle.
- Assistance with modifications to be purchased and installed.

Who can provide the service?

A Division of Rehabilitation Services approved vendor.

Who directs the services?

Vehicle modification can be partially self-directed.

Limitations

There is a \$17,500 lifetime limit unless otherwise approved by DDA. Modifications may only be provided once every seven (7) years.

MEDICAID FRAUD

Medicaid fraud is the payment of Medicaid funds for services or people who are not eligible to receive them. This can be done by the eligible person or by those providing services.

What is Participant Medicaid Fraud?

There are several ways a person can misuse their Medicaid eligibility.

Examples of Medicaid Participant fraud include:

- ✓ Someone else using your Medicaid card to receive services;
- ✓ Not reporting that you received a large amount of money such as an inheritance or personal injury settlement;
- ✓ Not reimbursing Medicaid or your service provider when another health insurance company pays you directly;
- ✓ Not reporting that you have assets such property or money owed to you;
- ✓ Not reporting all sources of income in your household;
- ✓ Giving away or selling an exempt asset while you are on Medicaid and not reporting it; and
- ✓ Signing blank timesheets or invoices authorizing payment for services.

What is Provider Medicaid Fraud?

When providers steal from Maryland Medicaid, they decrease the resources available to the program. When your own providers falsify information about what services they have given to you, they can decrease the benefits you actually receive.

Medicaid providers include doctors, dentists, hospitals, nursing homes, pharmacies, clinics, counselors, personal care/homemaker chore companies, and any other individual or company that is paid by the Medicaid program. It also includes family members if you choose them to provider your services.

Your providers with the Community Pathways program would include your resource coordinator and anyone you choose, or is chosen for you, to assist with your care. If a provider intentionally misrepresents the services they delivered, or the amount of time they spent performing them and are paid more by Maryland Medicaid, than they actually earned, provider fraud has occurred. If a provider bills for an assessment and says you need specific equipment that you must buy from them, provider fraud has also occurred.

Here are some examples of provider fraud:

- Billing for any services not actually performed;
- Billing for a more expensive service than was actually rendered;
- Billing for several services that should be combined into one billing;
- Billing twice for the same service;

- Dispensing generic drugs and billing for brand-name drugs;
- Giving or accepting something in return for medical services;
- Bribery;
- Billing for unnecessary services;
- False cost reports;
- Embezzlement of participant funds; and
- Falsifying timesheets or signatures in connection with the provision of personal care services.

Who do I contact if I suspect Medicaid fraud?

- 1. You can call the Fraud Hotline at the Maryland Department of Health and Mental Hygiene at 866-770-7175.
- 2. You can send a complaint form on the DHMH website. The web address is http://www.dhmh.maryland.gov/oig/Documents/providercomplaintform_final.pdf
- 3. You can contact your local DDA Regional Office.
- 4. You can contact your resource coordinator.

EXPLANATION OF TERMS USED IN THE COMMUNITY PATHWAYS WAIVER

- **Adult** An individual is considered an adult by DDA when he or she turns age 21.
- **CMS** (**Centers for Medicare and Medicaid Services**) The federal agency which oversees Medicaid and waiver programs and regulates the Community Pathways Waiver.
- **CPR** (Cardio-Pulmonary Resuscitation) A way to help a person who has stopped breathing to get air until they breathe on their own again, or until a medical person can help them. Your support staff will need to be trained in this technique.
- **Employer of Record** This means that if you self-direct services for yourself or a family member and hire and supervise your staff you are their employer like having your own business. You are responsible for all of the things that go along with that, like picking staff, paying them, paying taxes, etc. The Fiscal Management Service and the Support Broker help you, but you are the boss.
- **Fiscal Management Services (FMS)** This is also sometimes called a fiscal intermediary. FMS helps you and your family to manage and pay for services using the DDA approved funds in your individual budget. The FMS will help you act as the employer and handle paying your employees (including all the necessary taxes) and will handle all paperwork and reporting requirements to IRS, etc. Your FMS will also help you to understand your responsibilities as an employer of record.
- **Formal Service or Supports** These are services or supports for which you pay. They may include such services as nursing, transportation, or assistance to find a job.
- Individualized Budget This is a detailed list of what you will use your approved service dollars to pay for. You will decide how much service and support you need, and what they will cost. You will decide about the money, but your FMS will actually keep the money and pay bills for you, kind of like a bank.
- **Informal Supports** (sometimes called Natural Supports) These are supports that we develop through community connections or friends and family. They are *not paid* supports, and may include such things as a neighbor helping you to grocery shop once a week, or a friend driving you to church.
- Medicaid (sometimes called Medical Assistance) Medicaid is a health insurance program for eligible low-income people. It is funded and administered through a state-federal partnership. Although there are broad federal requirements for Medicaid, states have a wide degree of flexibility to design their program. States have authority to: establish eligibility standards; determine what benefits and services to cover; and set payment rates.
- **Participant-Directed Services (sometimes called Self-Directed Services)** This means that you and your family, or trusted supporters, make the choices and decisions about your

- services. You design your plan, design your budget, and decide whom to hire to provide your supports.
- **Person-Centered Planning** A way to help you think about your life, what is important to you and for you, and how you want to achieve the lifestyle that you would like. It's a process in building relationships, community connections and resources. You choose the person who will lead your planning process and how to make the plan actually happen.
- Resource Coordinator Is provided to individuals and families eligible for services under DDA. DDA pays for resource coordinators out of the DDA administrative budget. You do not have to pay for them out of your individual budget. They are responsible to assist and provide support in developing your plan, budgets, Support Broker and other needed assistance, at a level that makes sense for you and your family. They are responsible for monitoring your plan to assure that you are satisfied with the outcomes, and assuring your health and safety throughout the process. You must have a resource coordinator in order to be in Community Pathways.
- **Self-Determination** A philosophy that is based on five (5) basic principles. The key principles of self-determination are Freedom, Authority, Responsibility, Support, and Confirmation.
- **Support** This term is used many times instead of the word 'service" and it is intended to mean that someone does something with you and in the way that you want, not "to" or "for" you. A support can also be a piece of technology or other purchased equipment/supplies.
- **Safeguards** One of the important things about having freedom and responsibility is to be sure to make decisions in a way that is safe for you and your family. DDA is responsible to ensure that you think about safety, and that your plan includes information about keeping yourself safe and healthy.
- Support Broker Someone that you hire or identify to make help with self-direction and work with you to get the supports and service you need. The broker is someone that works for you and does not have conflict of interest (meaning that your needs are the most important and that the brokers interest or needs are not opposite or standing in the way of yours). The Support Broker should be someone already close to you or someone you feel you can develop a trusting and effective working relationship with.

DDA REGIONAL OFFICES

Central Maryland Regional Office is located in Baltimore, Maryland.

Counties Served: Anne Arundel County, Baltimore County, Howard County, Harford County, and Baltimore City.

DDA - Central Maryland Regional Office

1401 Severn Street

Baltimore, Maryland 21230

Telephone: 410-234-8200 Toll Free: 1-877-874-2494

Maryland Relay: 1-800-735-2258

Fax: 410-234-8397

Eastern Shore Regional Office is located in Salisbury, Maryland.

Counties Served: Caroline County, Cecil County, Dorchester County, Kent County, Queen Anne's County, Somerset County, Talbot County, Wicomico County, and Worcester County.

DDA - Eastern Shore Regional Office

926 Snow Hill Road

Cottage 100

Salisbury, Maryland 21804

Telephone: 410-572-5920 Toll Free: 1-888-219-0478

Maryland Relay: 1-800-735-2258

Fax: 410-572-5988

Southern Maryland Regional Office is located in Laurel, Maryland.

Counties Served: Calvert County, Charles County, Montgomery County, Prince George's

County, and St. Mary's County.

DDA - Southern Maryland Regional Office

312 Marshall Ave., 7th Floor

Laurel, Maryland 20707

Telephone: 301-362-5100 Toll Free: 1-888-207-2479

Maryland Relay: 1-800-735-2258

Fax: 301-362-5130

Western Maryland Regional Office located in Hagerstown, Maryland.

Counties Served: Allegany County, Carroll County, Frederick County, Garrett County, and

Washington County.

DDA - Western Maryland Regional Office

1360 Marshall Street

Hagerstown, Maryland 21740

Telephone: 301-791-4670 Toll Free: 1-888-791-0193

Maryland Relay: 1-800-735-2258

Fax: 301-791-4019